

NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket No. (Optional): A-6237 (191930-1170)					
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on <hr style="width: 30%; margin-left: 0;"/> Signature –		In re Application of Bacon, et al. <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 5px;">Application Number 09/729,523</td> <td style="width: 50%; padding: 5px;">Filed December 4, 2000</td> </tr> </table> For Method of Identifying Multiple Digital Streams within a Multiplexed Signal <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 5px;">Group Art Unit 2131</td> <td style="width: 50%; padding: 5px;">Examiner Sherkat, Arezoo</td> </tr> </table>		Application Number 09/729,523	Filed December 4, 2000	Group Art Unit 2131	Examiner Sherkat, Arezoo
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Applicant hereby appeals to the Board of Patent Appeals and interferences from the last decision of the examiner. The fee for this Notice of Appeal is (37 CFR 1.17(b)) \$ 500.00 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: <input type="checkbox"/> A check in the amount of the fee is enclosed. <input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet. <input type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. . I have enclosed a duplicate copy of this sheet. <input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed. I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) Is enclosed. (Form PTO/SB/96) <input type="checkbox"/> attorney or agent of record. <input checked="" type="checkbox"/> Attorney or agent acting under 37 CFR 1.34(a). Registration No. if acting under 37 CFR 1.34(a) 58,169 <div style="text-align: right;"> _____ Benjamin A. Balser, Reg. No. 58,169 <u>January 16, 2007</u> Date </div>							
Note: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.							
<input type="checkbox"/> *Total of _____ forms are submitted.							